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FACSIMILE TRANSMITTAL SHEET

TO:	FROM:
Technology Center 2817	Tracy M. Heims
COMPANY:	DATE:
U.S. Patent & Trademark Office	2/2/2005
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
(703) 872-9306	12
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
(571) 272-1759	003-03-016
RE:	YOUR REFERENCE NUMBER:
Amendment & Request for Reconsideration	SN: 10/613,316

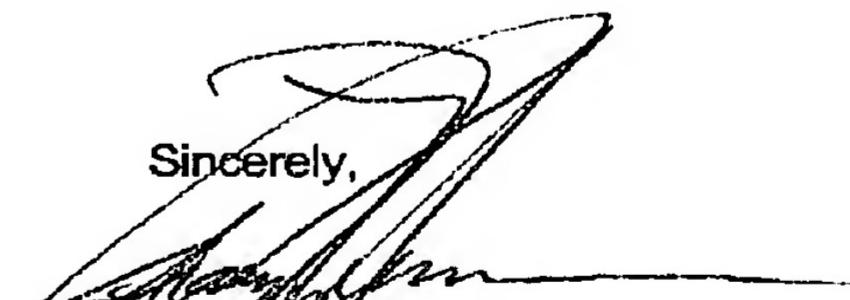
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Included herein: PTO/SB/21 Transmittal form (1 page), PTO/SB/22 Petition for Extension of Time (1 page), Amendment and Request for Consideration (7 pages), Replacement Drawings (5 pages).

Please direct any questions concerning this application to Tracy M Heims at the phone number listed above.

Included herein:


Sincerely,
Tracy M Heims

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

11

Application Number

10/613,316

Filing Date

07/07/2003

First Named Inventor

Wei-Zen Chen

Art Unit

2817

Examiner Name

Joseph Chang

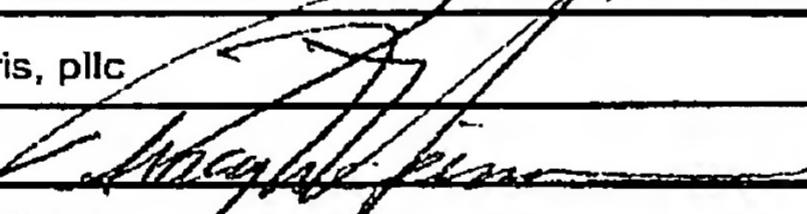
Attorney Docket Number

003-03-016

ENCLOSURES (Check all that apply)

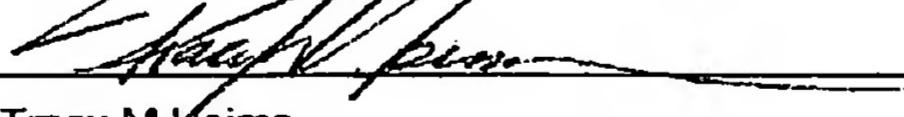
<input type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
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Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Apex Juris, PLLC		
Signature			
Printed name	Tracy M Heims		
Date	02/02/2005	Reg. No.	53,010

CERTIFICATE OF TRANSMISSION/MAILING

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Signature			
Typed or printed name	Tracy M Heims	Date	02/02/2005

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PTO/SB/97 (08-03)

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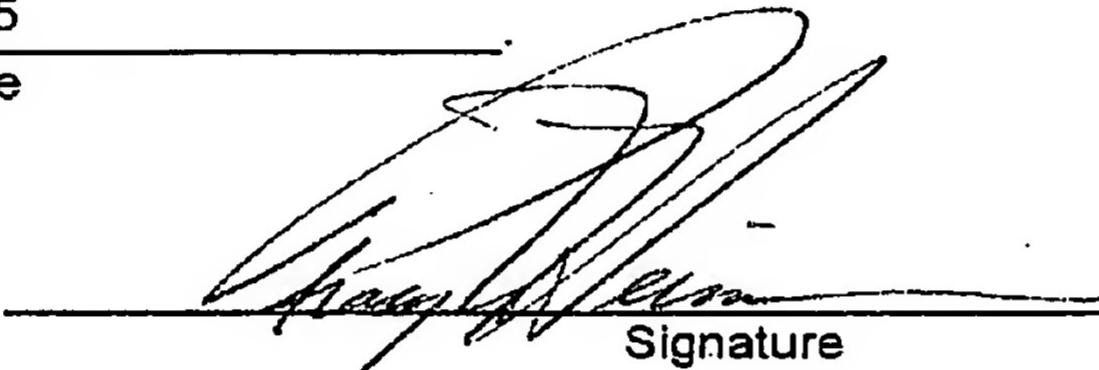
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1. Certificate of Transmission
2. PTO/SB/21 Transmittal Form (1 page)
3. PTO/SB/22 Petition for Extension of Time, one month (1 page)
4. Amendment and Request for Reconsideration and Replacement drawings (12 pages)

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